

## **INSTRUCTIONS FOR TESTING ASC X12N 837 ENCOUNTER TRANSACTIONS**

MDCH is requiring submission of encounter data, using transaction formats specified as the National Electronic Data Interchange Transaction Set Health Care Encounter/Claim, **ASC X12N 837 Version 4010**, from the following types of health plans:

- Medicaid Health Plans (MHPs),
- Special Health Plans (SHPs),
- Community Mental Health Prepaid Health Plans (PHPs),
- Community Mental Health Service Programs (CMHSPs),
- Substance Abuse Coordinating Agencies (SA CAs),
- Dental Health Plans, and
- Other capitated health plans.

Depending on the type of service provided, your encounter transactions may need to be submitted using either the Institutional (X096), Dental (X097) or Professional (X098) Industry Identifier of the 837 Encounter Transaction.

The schedule for conversion to HIPAA compliant encounter reporting varies by organization. CMH PHPs, CMHSPs, and SA CAs will need to begin reporting encounter data for services rendered on or after October 1, 2002. That reporting will occur beginning about February 17, 2003. All other capitated health plans will begin reporting encounter data for services rendered on or after January 1, 2003, with electronic data submission starting about February 17, 2003.

In order to communicate electronically with MDCH, you must first obtain an Identification Number and password from the MDCH Automated Billing Unit. For general instructions on how to obtain that Identification Number and password, please refer to the MDCH Electronic Billing Manual, which can be found on the web at [www.michigan.gov/mdch](http://www.michigan.gov/mdch). Once you have reached the web site, click on:

- “Providers” (on the left side of the screen), then
- “Information for Medicaid Providers” (on the left side of the page), then
- “Michigan Medicaid Uniform Billing Project.”

Near the bottom of this page, under “Electronic Claims Submission Information” is a link titled “MDCH Electronic Submission Manual.”

Specific instructions and other references related to HIPAA compliance and transactions may be found at [www.michigan.gov/mdch](http://www.michigan.gov/mdch). From that site, click on “Providers” on the left side of the screen, then “HIPAA Implementation Materials” under Quick Links. That page contains several useful links, including:

- L 02-16 HIPAA Mandate letter to Medicaid Providers
- HIPAA Frequently Asked Questions (FAQ) – This link (under Related Content) will display a page outlining several categories of frequently asked questions, including a General FAQ, a Provider-Specific FAQ (with separate documents for mental health and substance abuse and for dental services), and a FAQ for Health Plans.
- Data Clarification Documents – This link (under Related Content) directs you to documents that provide **essential details** regarding MDCH data requirements for individual transaction sets. For encounter reporting, focus on the three data clarification documents for the Institutional, Professional and/or Dental Encounter version 4010, depending on the services you provide. These are companion documents to the HIPAA implementation guides for the 837I, 837P and 837D v4010 transactions, which may be found at [www.wpc-edi.com](http://www.wpc-edi.com).

- Encounter Data Submission Transition Meeting July 22, 2002 – This link (also under Related Content) includes presentation materials from a meeting sponsored by MDCH, providing an overview of this process.

MDCH is recommending a two-stage electronic encounter submission testing process, summarized as follows:

**Stage 1 – Integrity Testing** is strongly recommended for all plans. Integrity testing provides the opportunity to test 837 v4010 transactions for syntax errors and ensure they are formatted correctly. This provides an easy-to-use environment for judging the adequacy of your 837 v4010 encounter reporting systems and/or service bureaus. MDCH is not in a position to support wide-scale problem diagnosis for transactions that do not pass Stage 1 Integrity Testing. This type of testing should be performed **before** sending any 837 v4010 transactions to MDCH.

**Stage 2 – Business-to-Business Testing** for encounter data is the process of submitting test files to MDCH for processing through the MDCH test environment. This process is also strongly recommended.

The following paragraphs provide more detailed instructions regarding each of the two stages of recommended testing activity.

### **STAGE 1 – INTEGRITY TESTING**

For the 837 v4010, MDCH entered into an agreement with Blue Cross/Blue Shield of Michigan (BCBSM) that allows Michigan Medicaid providers and capitated health plans to test electronic claim and encounter transaction files using an automated testing tool on the BCBSM web site. There is no charge for this testing service.

Before you can begin integrity testing using the automated testing tool provided by BCBSM, you must first create an account. The process for creating an account, as well as the process for submitting files for analysis, is spelled out on the BCBSM web site, at: [www.bcbsm.com/providers/trans\\_test.shtml](http://www.bcbsm.com/providers/trans_test.shtml).

In summary, you create an account by sending an Email to the BCBSM Administrator, identifying yourself as an organization that wishes to file electronic transactions with MDCH. You should receive a User ID and password within 1 or 2 business days. Once you have received your User ID and password, you can login to the site and then begin the process of submitting transaction files for analysis. To upload a test file, click on Upload File. Use the browse function to locate the file you want to analyze (or type in the full path to that file on your PC) and then click on the Upload Now button. (If you have more than one file to analyze, click on upload another file and repeat until all files have been uploaded.)

Once the file upload process is complete, click on the Analysis Page link on the bottom of the page. Select the file you would like to test by clicking on the circular radio button next to the file's name. Use the drop down box to select the desired guideline to be used, then click "Analyze." A scrolling "Analysis in Progress..." message will appear in the column labeled "Analysis Date." Wait until the analysis is complete, which becomes apparent when a notebook icon appears, along with the date and time of the analysis, replacing the scrolling message. A summary of the analysis results for that file will be noted in the column marked "Status," which will either be:

- A green checkmark (the file passed; no errors nor warnings),
- A yellow triangle (the file had minor data errors or warnings), or
- A red check mark (the file had fatal error(s)).

To view the detailed results of the analysis, click on the notebook icon. Scroll down to see errors and messages, which will be noted by a different color font (blue, green, or red).

You should continue to take advantage of this easy-to-use testing service, using a wide variety of transactions, until you are satisfied that your system generates HIPAA-compliant X12N 837 v4010 transactions.

## **STAGE 2 – BUSINESS-TO-BUSINESS TESTING**

Business-to-business testing is a process that should be performed after completion of Stage 1 Integrity Testing through BCMSM or Claredi. If you do not currently have a User Name and Password allowing you to communicate with the MDCH Data Exchange Gateway (DEG), you will need to complete some preliminary steps, which are outlined in our Electronic Submission Manual, which may be found at [www.michigan.gov/mdch](http://www.michigan.gov/mdch). You are encouraged to become familiar with this manual, as it is a valuable resource for electronic claims submission.

Most CMH PHPs, CMHSPs and SA CAs are currently working with MDCH, in support of Stage 1 Integrity Testing activities. In addition, we hope that many of these organizations will also achieve *certification* of their ability to create compliant 837 encounter transactions from Claredi, an independent testing and certification firm. After completing these activities, these organizations may begin transmitting test encounter transactions (accompanied by test Quality Improvement (QI) Data) to MDCH for evaluation purposes. ***Note that submission of QI data is required of CMH PHPs, CMHSPs and SA CAs, and is not required from any other plans, such as MHPs or SHPs.***

All capitated health plans may immediately begin transmitting test encounter transactions to MDCH. We hope to complete most business-to-business testing activity with these plans by February 14, 2003.

After the test encounter file has been received, MDCH will attempt to translate the file and will post a 997 Functional Acknowledgement transaction to the submitter's mailbox. Submitters should check their mailbox for this acknowledgment. If the file is acceptable, it will be loaded into our test encounter processing system, which will produce edit reports for our analysis. The test encounter processing system will also post an error file to the submitter's mailbox, for retrieval and analysis. After we complete our internal review, we will contact you to discuss the results of our test processing and note whether the encounter transactions were properly received and processed. Should errors be reported, we will investigate and assess the source of the problem. If we are unable to translate the file due to fatal errors or other problems, we will contact you to investigate those problems. At that point, we will ask whether the test file had successfully been processed by the BCBSM integrity testing service.

Follow the following steps to perform Stage 2 Business-to-Business Testing:

1. Create a test file of 837 v4010 encounter transactions, using your internal systems and EDI software or service bureau. That file should include various services, no more than 100 encounters, and should reference actual, valid subscriber identifiers as outlined in the Data Clarification Documents (Medicaid ID numbers, Social Security Numbers, Child Identification Numbers (CIN), or unique plan-assigned identification numbers). We encourage you to include encounter transactions for each type of service you provide, i.e., Institutional, Dental, or Professional. Those encounters may be combined in one test file, or may be transmitted in separate test files. Each file must include an Interchange Envelope, containing various ISA elements as specified in the Data Clarification Document and/or Implementation Guide. For the test encounters, you must specify **ENCOUNTER** in the ISA08 segment and **T** in the ISA15 segment. The Interchange Envelope may contain one or more Functional Groups. Each Functional Group will specify whether that Functional Group contains Institutional, Dental or Professional encounter transactions. In the GS03 segment of each Functional Group, you must specify **ENCOUNTER**. The GS08 segment of each Functional Group must contain **004010X096**, **004010X097**, or **004010X098**, indicating whether that group contains Institutional, Dental, or Professional encounter transactions, respectively. For each test file that you create, store the file on your PC or on a shared network location that is easily accessible (e.g., on a mapped drive).
2. ***CMH PHPs, CMHSPs and SA CAs only:*** These plans need to create one or more test file(s) of Quality Improvement (QI) data for each consumer included in your test file of encounter transactions. (This step is not required from these plans for testing our ability to *translate* your 837 Encounter transactions, but is required to obtain meaningful error reporting from our test encounter processing routines.) The format and content of these QI data files are detailed in the Supplemental Instructions for 837 Encounter and Quality Improvement (QI) Data Submission Manuals that were distributed to all plans last year. This documentation will soon be available on the MDCH web site as well.
3. ***CMH PHPs, CMHSPs and SA CAs only:*** These plans must submit the QI data file(s) **before** uploading the 837 Encounter test file, by logging onto the DEG (Data Exchange Gateway), using the connection information supplied by MDCH, then entering the following information:

### **CMH PHPs, CMHSPs:**

PUT {your drive\directory\filename} 4957T@DCHBULL. The drive, directory and filename combination should be the full path to the location on your PC (or network) where the file to be tested is located on your computer. The following example illustrates this command:

PUT C:\CATALOG\QI\_Test.txt [4957T@DCHBULL](#)

### **Substance Abuse CAs:**

This group of providers submits QI data using three different file formats, and three different file names in our Data Exchange Gateway (DEG), as follows:

#### **Admission Data**

PUT {your drive\directory\filename} [4823T@DCHBULL](#). The drive, directory and filename combination should be the full path to the location on your PC (or network) where the file to be tested is located on your computer. The following example illustrates this command:

PUT C:\CATALOG\Admit\_tf.txt [4823T@DCHBULL](#)

#### **SARF Data**

PUT {your drive\directory\filename} [4825T@DCHBULL](#). The drive, directory and filename combination should be the full path to the location on your PC (or network) where the file to be tested is located on your computer. The following example illustrates this command:

PUT C:\CATALOG\SARF\_tf.txt [4825T@DCHBULL](#)

#### **Discharge Data**

PUT {your drive\directory\filename} [4824T@DCHBULL](#). The drive, directory and filename combination should be the full path to the location on your PC (or network) where the file to be tested is located on your computer. The following example illustrates this command:

PUT C:\CATALOG\Disch\_tf.txt [4824T@DCHBULL](#)

4. To submit the 837 v4010 test file, all plans must log onto the DEG (Data Exchange Gateway), using the connection information supplied by MDCH, then enter the following information:

PUT {your drive\directory\filename} [4951T@DCHEDI](#). The drive, directory and filename combination should be the full path to the location on your PC (or network) where the file to be tested is located on your computer. The following example illustrates this command:

PUT C:\CATALOG\testfile.txt [4951T@DCHEDI](#)

After you have issued the PUT command and the 837 file has been transferred, it should be immediately translated. As noted in the Electronic Submission Manual, you can enter a DIR command, with the name of the file sent, to see the 997 Functional Acknowledgement. You can download that 997 Functional Acknowledgement by entering a GET command; be careful to change the file name for the destination system so the file you sent is not written over.

5. You **must** then send an Email, including a contact name and telephone number in your organization, to the following contacts to inform MDCH that a test file has been submitted:

<Tammie Savage> [SavageT@Michigan.gov](mailto:SavageT@Michigan.gov);  
<Felix Carter> [CarterF1@Michigan.gov](mailto:CarterF1@Michigan.gov);  
<Daryl Katalenich> [KatalenichD@Michigan.gov](mailto:KatalenichD@Michigan.gov);  
<Jim Kunz> [KunzJ@Michigan.gov](mailto:KunzJ@Michigan.gov)

Please use a subject line of either "Encounter Test File Submission for DCH00XX" or "QI Test File Submission for DCH00XX", where DCH00XX is your MCDH-assigned provider ID.

6. MDCH will perform a preliminary review of the translated output from your test file. If the file is acceptable, it will be loaded into the test encounter processing system. If the test file is not acceptable, we will advise you of problems contained in the file that prevent further testing and will provide guidance to modify the file according to Medicaid specifications.

7. Once the test file has been accepted, the QI data or 837 encounter transactions will be loaded into our test systems and error return file(s) will be created. MDCH will review these error return files and provide you with a summary of our analysis. These error return files may be retrieved from the submitter's DEG mailbox, via an ftp GET command, using the following file names (APPL IDs):
  - 4950 — For the 837 encounter data
  - 4956 — For the CMH QI data
  - 4827 — For the Substance Abuse QI data (for all three file formats).

Detailed instructions for retrieval and interpreting these error files are contained in the Supplemental Instructions Document, which was previously referenced in these instructions.

8. After review of the test file processing has been completed, MDCH will provide you with our assessment and will be available to answer any questions that you may have. The entire testing process typically takes a minimum of 5-10 business days to complete.